

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE			
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/						51		/		
2		/					52		/		
3		/					53		/		
4		/					54		/		
5		/					55		/		
6		/					56		/		
7		/					57		/		
8		/					58		/		
9		/					59		/		
10		/					60		/		
11		/					61		/		
12		/					62		/		
13		/					63		/		
14		/					64		/		
15		/					65		/		
16		/					66		/		
17		/					67		/		
18		/					68		/		
19		/					69		/		
20		/					70		/		
21		/					71		/		
22		/					72	/	/		
23		/					73		/		
24		/					74		/		
25		/					75		/		
26		/					76		/		
27		/					77		/		
28		/					78		/		
29		/					79		/		
30		/					80		/		
31		/					81		/		
32		/					82		/		
33		/					83		/		
34		/					84		/		
35		/					85		/		
36		/					86		/		
37		/					87		/		
38		/					88		/		
39		/					89		/		
40		/					90		/		
41		/					91		/		
42	/						92	/	/		
43		/					93		/		
44		/					94		/		
45		/					95		/		
46		/					96		/		
47		/					97		/		
48		/					98		/		
49		/					99		/		
50		/					100		/		
TOTAL IND.	2						TOTAL IND.	2			
TOTAL DEP.	48						TOTAL DEP.	48			
TOTAL CLAIMS	50						TOTAL CLAIMS	50			

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CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
10 1		/					/ 51	2
2		/					52	2
3		/					53	2
4		/					54	/
5		/					55	/
6		/					56	/
7		/					57	/
8		/					58	
9		/					59	
10		/					60	
11		/					61	
12		/					62	
13		/					63	
14		/					64	
15		/					65	
16		/					66	
17		/					67	
18		/					68	
19		/					69	
20		/					70	
21		/					71	
22		/					72	
23		/					73	
24		/					74	
25		/					75	
26		/					76	
27		/					77	
28		/					78	
29		2					79	
30		2					80	
31		2					81	
32		2					82	
33		2					83	
34		2					84	
35		2					85	
36		2					86	
37		2					87	
38		2					88	
39		2					89	
40		2					90	
41		2					91	
42		2					92	
43		2					93	
44		2					94	
45		2					95	
46		2					96	
47		2					97	
48		2					98	
49		2					99	
50		2					100	
TOTAL IND.	0						TOTAL IND.	2
TOTAL DEP.	72						TOTAL DEP.	8
TOTAL CLAIMS	72						TOTAL CLAIMS	10

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